# PATENT APPLICATION FEE DETERMINATION RECORD
## Effective December 8, 2004

10/022 955

## CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) | | SMALL ENTITY TYPE ☐ | | OR | OTHER THAN SMALL ENTITY | |
|---|---|---|---|---|---|---|---|---|
| | | | | RATE | FEE | | RATE | FEE |
| TOTAL CLAIMS | | | | | | | | |
| FOR | NUMBER FILED | NUMBER EXTRA | | BASIC FEE 7.. ~ | | OR | BASIC FEE | |
| TOTAL CHARGEABLE CLAIMS | minus 20 = | * | | X$ 25 = | ' | OR | X$50 = | |
| INDEPENDENT CLAIMS | minus 3 = | * | | X100 = | | OR | X200 = | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | ☐ | | +180 = | | OR | +360 = | |
| | | | | TOTAL | | | TOTAL | |

* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II   8-14-06

| | | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | (Column 3) PRESENT EXTRA | | SMALL ENTITY RATE | ADDI-TIONAL FEE | OR | OTHER THAN SMALL ENTITY RATE | ADDI-TIONAL FEE |
|---|---|---|---|---|---|---|---|---|---|---|---|
| **A M E N D M E N T  A** | Total | 10 | Minus | 20 | | | X$ 25 = | | OR | X$50 = | |
| | Independent | 1 | Minus | 3 | | | X100 = | | OR | X200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | ☐ | | +180 = | | OR | +360 = | |
| | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

| | | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | (Column 3) PRESENT EXTRA | | RATE | ADDI-TIONAL FEE | OR | RATE | ADDI-TIONAL FEE |
|---|---|---|---|---|---|---|---|---|---|---|---|
| **A M E N D M E N T  B** | Total | | Minus | | = | | X$ 25 = | | OR | X$50 = | |
| | Independent | | Minus | | = | | X100 = | | OR | X200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | ☐ | | +180 = | | OR | +360 = | |
| | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

| | | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | (Column 3) PRESENT EXTRA | | RATE | ADDI-TIONAL FEE | OR | RATE | ADDI-TIONAL FEE |
|---|---|---|---|---|---|---|---|---|---|---|---|
| **A M E N D M E N T  C** | Total | | Minus | | = | | X$ 25 = | | OR | X$50 = | |
| | Independent | | Minus | | = | | X100 = | | OR | X200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | ☐ | | +180 = | | OR | +360 = | |